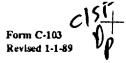
Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department



DISTRICT I

CONDITIONS OF APPROVAL, IF ANY:

## OIL CONSERVATION DIVISION

<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO.		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088		30-005-62918  5. Indicate Type of Lease		
DISTRICT III	×.		STATE FEE X		
1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.		
( DO NOT USE THIS FORM FOR PRO DIFFERENT RESER	CES AND REPORTS ON WEL POSALS TO DRILL OR TO DEEPEN VOIR. USE "APPLICATION FOR PEI 101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name		
1. Type of Well: OIL WELL X WELL  GAS WELL	OTHER	4H D 7 1993	White		
2. Name of Operator			8. Well No.		
	ing Company	O. C. D.	3		
3. Address of Operator	Wasth MV 76102	THE CONTRACT OF THE STATE OF TH	9. Pool name or Wildcat		
930 W. First Street, F1	. WOLLII, IX 70102		Race Track (Devonian)		
	Feet From The East	Line and184	7 Feet From The North Line		
Section 13 Township 10S Range 27E NMPM Chaves County  10. Elevation (Show whether DF, RKB, RT, GR, etc.)  3796					
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING			
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB X intermediate casing		
OTHER:		OTHER:			
work) SEE RULE 1103.  Drilled 12½" hole to 159  Ran 38 jts. 8 5/8, 24#,  w/6% gel, 2% Cacl² and ½  Cello-Seal. Cement did  RIH w/ 1" Tbg. and pumps	95'. TD @ 11:00 AM 1-2 J-55, STC casing set @ #/sx Cello-Seal tailed not circulate. Ran te ed 250 sx class 'c'. C rams, manifold valves,	21-93. Top San A 1595'. Initia 1 by 200 sx clas 2mp. surv. and for 2irculated 10sx	Andres @ 1568'.  lly cemented w/500 sx PSL s'c' w/2% Cacl <sup>2</sup> and ¼#/sx ound top of cement at 550'. to pit. Weld on wellhead. i successfully. Prepare		
I hereby certify that the information above is true	and complete to the best of my knowledge and	belief.			

I hereby certify that the information	above is true and complete to the best of my knowle	dge and belief.	
SIONATURE JUL	n Robert	_ muz Engineer	DATE 1-25-93
TYPE OR PRINT NAME JOHN	M. Roberts		<u>тецерноне но. 817—336—57</u> 57
(This space for State Use)	ORIGINAL SIGNED BY MIKE WILLIAMS		££D 0.1000
APPROVED BY	SUPERVISOR, DISTRICT IL	— TITLE	FEB = 3 1993